

APPLICATION TO ATTEND
ALTAMONTE CHRISTIAN SCHOOL

APPLYING FOR SCHOOL YEAR: _____

Be sure to fill out this application in its entirety for consideration. No response to any single question will automatically prevent acceptance to ACS.
PLEASE PRINT CLEARLY. APPLICATION WILL NOT BE ACCEPTED WITHOUT REQUIRED ATTACHMENTS.

CHILDREN ENROLLING

1. SS# _____ - _____ - _____ NAME (F) _____ (MI) _____ (L) _____

GOES BY _____ GENDER _____ DOB _____ GRADE APPLIED FOR _____

AGE _____ PRESENT GRADE AND SCHOOL NAME _____

RACE (circle one) American Indian/Alaska Native Asian Hispanic/Latino Black/African American
Native Hawaiian/Pacific Islander White Multiracial Other _____

NAME OF CHURCH _____ MEMBER? _____ REGULAR ATTENDANCE? _____

2. SS# _____ - _____ - _____ NAME (F) _____ (MI) _____ (L) _____

GOES BY _____ GENDER _____ DOB _____ GRADE APPLIED FOR _____

AGE _____ PRESENT GRADE AND SCHOOL NAME _____

RACE (circle one) American Indian/Alaska Native Asian Hispanic/Latino Black/African American
Native Hawaiian/Pacific Islander White Multiracial Other _____

NAME OF CHURCH _____ MEMBER? _____ REGULAR ATTENDANCE? _____

FAMILY RECORD (Primary Relations)

Circle one please:
Married Widowed
Divorced Single
Separated

RELATION-1 _____ NAME (F) _____ (MI) _____ (L) _____

WORK _____
PHONE _____ OCCUPATION _____ EMPLOYER _____

HOME ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ CELL _____ OTHER _____

BEST E-MAIL ADDRESS FOR SCHOOL CORRESPONDENCE _____

NAME OF CHURCH _____ MEMBER? _____ REGULAR ATTENDANCE? _____

RELATION-2 _____ NAME (F) _____ (MI) _____ (L) _____

Circle one please:
Married Widowed
Divorced Single
Separated

WORK _____
PHONE _____ OCCUPATION _____ EMPLOYER _____

HOME ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ CELL _____ OTHER _____

BEST E-MAIL ADDRESS FOR SCHOOL CORRESPONDENCE _____

NAME OF CHURCH _____ MEMBER? _____ REGULAR ATTENDANCE? _____

CHILDREN BEING ENROLLED LIVE WITH (relationship) _____

WHO IS RESPONSIBLE FOR THE TUITION ACCOUNT? _____ McKay Children's First
Scholarship? _____ Scholarship? _____

If other than Family Record listed above, please complete the following:

RELATION _____ NAME (F) _____ (MI) _____ (L) _____

MAILING ADDRESS _____ CITY _____ ST _____ ZIP _____

HOME PHONE _____ CELL _____ WORK PHONE _____

LIST ANY ALLERGIES OR SPECIAL RESTRICTIONS FOR STUDENTS _____

HAVE ANY OF THE LISTED STUDENTS EVER BEEN ENROLLED IN ANOTHER CHRISTIAN SCHOOL? _____ IF YES, WHEN AND WHERE? _____

ARE THERE OTHER SCHOOL AGE CHILDREN IN THE FAMILY NOT BEING ENROLLED? _____ IF SO, WHY? _____

WHY DO YOU WANT YOUR CHILD(REN) TO ATTEND ALTAMONTE CHRISTIAN SCHOOL? _____

WHO RECOMMENDED THE SCHOOL TO YOU OR HOW DID YOU FIRST HEAR ABOUT US? _____

(If you answer YES to any of the following, please give **full** explanation and note which child, if enrolling more than one.)

HAS YOUR CHILD(REN)...

EVER REPEATED A GRADE? _____

EXPERIENCED LEARNING DIFFICULTIES IN MATH? _____
IN READING? _____

ATTENDED SUMMER SCHOOL? _____

RECEIVED TUTORING? _____

PARTICIPATED IN SPECIAL LEARNING PROGRAMS? _____

BEEN PLACED UNDER AN **IEP**-INDIVIDUAL EDUCATION PLAN? (Attach current and entire copy) _____

HAVE ANY MENTAL OR PHYSICAL HANDICAPS? _____

EXPERIENCED NOTABLE DISCIPLINE PROBLEMS AT HOME? _____
AT SCHOOL? _____

EVER BEEN CONVICTED OF A CRIME? _____

BEEN EXPELLED, SUSPENDED, OR ASKED TO WITHDRAW FROM SCHOOL? _____

USED ILLEGAL, NON-PRESCRIBED DRUGS? _____

USED BEVERAGE ALCOHOL (INCL. SOCIAL DRINKING)? _____

USED TOBACCO PRODUCTS? _____

The following questions (and some of those relative to church affiliation on the opposite page) are for our general information. Such data can be useful for marketing, to note trends and keep us "in the know," for counseling, and for publishing statistical summaries.

IN TERMS OF RATINGS, WHAT IS THE MOST "ADULT" LEVEL MOVIE, VIDEO, OR T.V. PROGRAM THEY ARE ALLOWED TO WATCH: G PG PG-13 R (circle one)

DO YOU LIMIT THE TIME YOUR CHILD(REN) WATCH TV? _____

DO YOU LIMIT THE TIME YOUR CHILD(REN) PLAY VIDEO GAMES? _____

DO YOU LIMIT TIME ON THE INTERNET? _____

DOES YOUR CHILD(REN) HAVE UNSUPERVISED INTERNET ACCESS? _____

IS THE COMPUTER CENTRALLY LOCATED OR IN CHILD'S BEDROOM? _____

COMMENTS: _____

PARENT SIGNATURE _____ DATE _____

FOR STUDENTS GRADES 6-12

IN ORDER FOR AN APPLICATION TO BE CONSIDERED AND PROCESSED FURTHER, EACH STUDENT IN GRADES 6-12 MUST COMPLETE AND ATTACH A **SPIRITUAL ASSESSMENT FORM**. THIS FORM IS AVAILABLE IN THE SCHOOL OFFICE.